

Exhibit A

Arrest Report dated August 1, 2005.

ALABAMA UNIFORM ARREST REPORT

Fingerprinted	R84 Completed
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No

OFFICER'S WORK PRODUCT MAY NOT BE PUBLIC INFORMATION

IDENTIFICATION	1 ORI #	2 AGENCY NAME	3 CASE #	4 SFX
	5 LAST, FIRST, MIDDLE NAME	6 ALIAS AKA		
	7 SEX	8 RACE	9 HGT.	10 WGT.
	11 EYE	12 HAIR	13 SKIN	14
ARREST	15 PLACE OF BIRTH (CITY, COUNTY, STATE)	16 SSN	17 DATE OF BIRTH	18 AGE
	19 MISCELLANEOUS ID #			
	20 SID #	21 FINGERPRINT CLASS	22 DL #	23 ST
	24 FBI #	25 IDENTIFICATION COMMENTS		
	26 RESIDENT	27 HOME ADDRESS (STREET, CITY, STATE, ZIP)	28 RESIDENCE PHONE	29 OCCUPATION (BE SPECIFIC)
	30 EMPLOYER (NAME OF COMPANY/SCHOOL)	31 BUSINESS ADDRESS (STREET, CITY, STATE, ZIP)	32 BUSINESS PHONE	
	33 LOCATION OF ARREST (STREET, CITY, STATE, ZIP)	34 SECTOR #	35 ARRESTED FOR YOUR JURISDICTION?	
	36 CONDITION OF	37 RESIST ARREST?	38 INJURIES?	39 ARMED?
	40 DESCRIPTION OF WEAPON			
	VEHICLE	41 DATE OF ARREST	42 TIME OF ARREST	43 DAY OF ARREST
45 ARRESTED BEFORE?				
46 CHARGE-1		47 UCR CODE	48 CHARGE-2	49 UCR CODE
50 STATE CODE/LOCAL ORDINANCE		51 WARRANT #	52 DATE ISSUED	53 STATE CODE/LOCAL ORDINANCE
54 CHARGE-3		55 UCR CODE	56 CHARGE-4	57 UCR CODE
58 STATE CODE/LOCAL ORDINANCE		59 WARRANT #	60 DATE ISSUED	61 STATE CODE/LOCAL ORDINANCE
62 DATE ISSUED				
63 ARREST DISPOSITION		64 IF OUT ON RELEASE	65 ARRESTED WITH (1) ACCOMPLICE (FULL NAME)	
66 ARRESTED WITH (2) ACCOMPLICE (FULL NAME)				
JUVENILE		70 VYR	71 VMA	72 VMO
	74 VCO TOP	75 TAG #	76 LIS	77 LIY
	78 VIN	79 IMPOUNDED?	80 STORAGE LOCATION/IMPOUND #	
	81 OTHER EVIDENCE SEIZED/PROPERTY SEIZED			
	82 JUVENILE	83 RELEASED TO		
	84 PARENT OR GUARDIAN (LAST, FIRST, MIDDLE NAME)	85 ADDRESS (STREET, CITY, STATE, ZIP)	86 PHONE	
	87 PARENTS EMPLOYER	88 OCCUPATION	89 ADDRESS (STREET, CITY, STATE, ZIP)	90 PHONE
	91 DATE AND TIME OF RELEASE	92 RELEASING OFFICER NAME	93 AGENCY/DIVISION	94 ID #
	95 RELEASED TO:	96 AGENCY/DIVISION	97 AGENCY ADDRESS	
	98 PERSONAL PROPERTY RELEASED TO ARRESTEE	99 PROPERTY NOT RELEASED/HELD AT:	100 PROPERTY #	
RELEASE	101 REMARKS (NOTE ANY INJURIES AT TIME OF RELEASE)			
	102 SIGNATURE OF RECEIVING OFFICER			
	103 SIGNATURE OF RELEASING OFFICER			
104 CASE #				105 SFX
106 CASE #				107 SFX
108 CASE #				109 SFX
110 ADDITIONAL CASES CLOSED				111 WATCH CMDR.
112 ID #				113 ARRESTING OFFICER (LAST, FIRST, M.)
114 ID #				115 SUPERVISOR
116 ID #				117 WATCH CMDR.

Exhibit B

Booking Sheet dated August 1, 2005

GENEVA COUNTY JAIL

BOOKING SHEET

Probation Check _____

Warrant Book _____

#20

Date 8-1-05 Time 10⁰⁴PM

Name Polcastro John Phillip
(LAST) (FIRST) (MIDDLE)

Alias _____

Date of Arrest 8-1-05 Social Security No. 096-44-7848

Race W Sex M Age 52 Eyes GREEN Hair BROWN

Ht. 5'7" Wt. _____ DOB 5-2-53 Photo _____ F.P. _____

Address 405 W WASHINGTON ST. SAMSON, AL
(STREET) (APT.) (CITY) (STATE) (ZIP)

Telephone _____ I.D. No. _____

NCIC Check _____

Next of Kin _____ Relationship _____

Address _____
(STREET) (APT.) (CITY) (STATE) (ZIP)

Charge Public Intox Bond _____ Charge Disorderly Conduct Bond _____

Charge PARSON 2 Bond _____ Charge Resisting Arrest Bond _____

Charge CEM Mischief Bond 21500 Charge 2nd Conviction Bond 32000.00

ARRESTING OFFICER Shane Aenoite
(PLEASE PRINT)

Signature _____

AGENCY Samson

BOOKING OFFICER W. Phillips
(PLEASE PRINT)

RELEASE INFORMATION

I have received all properties taken from me by the Geneva County Sheriff's Department.

Signature of Person Released _____

Date of Release _____ Time _____ Type of Release _____

Signature of Releasing Officer _____

P.O.E. _____

OCCUPATION _____

P.O.B. ItalyHOLD Geneva Co.WARRANT # 2005-000718-00

WARRANT # _____

WARRANT # _____

WARRANT # _____

BOOKING SHEET

Inmate Name _____ Date _____ Time _____

HEALTH SCREENING FORM

1. Have you ever had or been treated for: (mark box if answer is yes)

- | | |
|---|---|
| <input type="checkbox"/> a. Asthma | <input type="checkbox"/> g. Alcoholism |
| <input type="checkbox"/> b. Heart Trouble | <input type="checkbox"/> h. Mental Illness |
| <input type="checkbox"/> c. Hypertension | <input type="checkbox"/> i. Venereal Disease |
| <input type="checkbox"/> d. Diabetes | <input type="checkbox"/> j. Tuberculosis |
| <input type="checkbox"/> e. Epilepsy or Seizure | <input type="checkbox"/> k. Ulcer |
| <input type="checkbox"/> f. Drug Addiction | <input type="checkbox"/> l. Faintly of recent head injury |
| | <input type="checkbox"/> m. Hepatitis |

If any response was yes, please explain and give date of last treatment. _____

2. Are you allergic to anything? YES If yes, what? IODINE
(FOOD) FISH NO TYPE OF FISH

3. Have you ever been determined to be HIV positive? NO If yes, when? _____

4. Are you currently taking any prescription medication? NO If yes, what? _____

For what? _____

5. Does the inmate require a special diet prescribed by a physician? NO If yes, what? _____

For what? _____

6. Do you have any other medical or mental problem we should know about? NO If yes, what? _____

GENEVA COUNTY JAIL

I, _____, HAVE BEEN ADVISED BY
THE JAILER OF THE FOLLOWING;

ALL PROPERTY BROUGHT ON TO THE JAIL PREMISES ARE SUBJECT TO SEARCH BY
AUTHORIZED PERSONNEL FOR WEAPONS AND CONTRABAND

ALL INCOMING AND OUTGOING MAIL MAY BE CENSORED EXCEPT FOR
CORRESPONDENCE WITH COURT OFFICIALS

X

INMATE SIGNATURE

DATE 08.02.05 12 PM

Mark Jackson
JAILERS SIGNATURE

DATE 08.02.05 12 PM

BOOKING SHEET

Inmate Name _____ Date _____ Time _____

1. Check One:

_____ This inmate was cooperative in responding to the above questions and allowing me to observe him.

_____ This inmate refused or was unable to cooperate and refused to answer my questions concerning his medical history and/or potential for suicide. Reason for inability:

2. I certify that I have today observed inmate _____, asked him/her the questions listed on the Geneva County Jail's Booking Sheet, and accurately recorded my observation and his/her responses.

Signature of Booking Officer

Date: _____

Time: _____

Exhibit C

Affidavit of Ray Mock

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA**

JOHN P. POLCASTRO, SR.,

Plaintiff,

V.

GREG WARD, et al.,

Defendants.

Civil Action No. 1:05-cv-00909-MEF-VPM

AFFIDAVIT OF RAY MOCK

STATE OF ALABAMA

COUNTY OF GENEVA

BEFORE ME, the undersigned authority and Notary Public in and for said County and State at large, personally appeared Ray Mock, who being known to me and being by me first duly sworn on oath deposes and says as follows:

1. My name is Ray Mock. I am over the age of nineteen and competent to make this affidavit. I am currently employed at the Geneva County Sheriff's Department as a Deputy Sheriff for the Geneva County Sheriff's Department.

2. I state affirmatively that I neither acted, nor caused anyone to act, in such a manner as to deprive the Plaintiff of any right to which he was entitled.

3. On August 1, 2005, I was dispatched by 9-1-1 to assist the Samson Police Department on Washington Street in Samson, Alabama.

4. Upon arrival I saw a white male in the back of the Samson Police Department car which I later learned to be John Philip Polcastro.

5. The left side window of the Police car had been knocked out. The Samson Police informed me that Polcastro had kicked the window out.

6. Polcastro was cursing and yelling. He was bleeding. His hands were handcuffed behind his back, and his legs were tied with a strap.

7. The Samson Police informed me that Polcastro had tried to set fire to a house by lighting a fire with gasoline at the natural gas unit that led into the trailer.

8. I told the Samson Police that I would transport Polcastro to the Geneva County Detention Facility for them.

9. At that point, Polcastro seemed to have calmed down, so I asked the Samson Police to remove the straps from his legs.

10. However, about one mile out of Samson, Polcastro started kicking my window. Therefore I pulled over into the Samson Armory Parking lot.

11. I located some leg cuffs to put on Polcastro, but before I could get them on, Polcastro had kicked out the right back window of my Sheriff's Department vehicle.

12. When we arrived at the Geneva County Detention Facility, I brought Polcastro in the booking room and removed the cuffs. However, Polcastro was still being very hostile and belligerent.

13. The jailer on duty told Polcastro to go into the holding cell, but Polcastro refused. Polcastro put his hands on me and pushed me and began to try to hit me. Therefore, I pushed him off of me. Polcastro hit the wall knocking himself out.

14. I told the jailer to call the Geneva Rescue Squad to come check Polcastro. By the time they arrived, he had come to and was sitting upright in a chair. Polcastro refused treatment three or four times and continued to be hostile. Therefore, I took him to the holding cell.

15. At that time, another Deputy went into the cell to talk with Polcastro and finally convinced him to let him take him to the Emergency Room.

16. I followed all the policy and procedure of the Geneva County Sheriff's Department.

17. I used only the minimal amount of force necessary to protect myself from the assault committed against me by Polcastro.

18. I did not deny Polcastro medical treatment. In fact, I offered medical treatment to Polcastro, and he refused.

19. I was never in the possession of any cash money that was allegedly taken from Plaintiff's home.

20. He was charged with assault in the third degree for his assault on me.

21. I have not received a grievance from the Plaintiff concerning the allegations made the basis of his Complaint.

22. I swear to the best of my present knowledge and information that the above statements are true; that I am competent to make this affidavit; and, the above statements are made by drawing from my personal knowledge of the situation.


RAY MOCK

SWORN TO and SUBSCRIBED before me this 29 day of November, 2005.



NOTARY PUBLIC
My Commission Expires: 8/1/09

Exhibit D

Prison's Activity Sheet Notes dated August 2, 2005

GENEVA COUNTY JAIL
Prisoner's Activity Sheet

DATE	Prisoner's Name
8-1-05	John Phillip Polcastro
	Subject was brought in by 3403 for Samson. The Subject was bleeding & very disorderly causing the deputy, so I told him to go to H/C, when he got up he pushed 3403 & tried to hit him, 3403 stayed him, he hit the wall & was knocked out. We called 911, when they got here he refused any medical help & cursed us all out. We got him in H/C. and 3413 came in & talked him into going to E.R. 3403 said to book him in on Samson charges for now, with County charges coming
8-2-05	Subject brought back from Wregrass Emergency Room by 3413 Has Suro Bond on left eye upper eye brow, also has scratches on head and drew Blood sample.
8-2-05	JUDGE SET BONDS 25,000.00 NEED 1ST ARSON 2ND 25,000.00 ASSAULT 3RD 1,000.00 CRIMINAL MISCHIEF 3RD X2 1,000.00 EACH

GENEVA COUNTY JAIL
Prisoner's Activity Sheet

DATE	Prisoner's Name:
8-2-05	DISORDERLY CONDUCT 1,000.00
	PUBLIC INTOX 1,100.00
	2 TIME CONVICTED FELONY 1,000.00
	TOT. \$32,000.00
8-2-05	Finger Printis Ab OK everything
	10-4 - move Rts send 76 up to 56a
8-3-05	1st AP Band stay the same.
8-23-05	AP at 1:30 p - DR Mitchum Ax. OK
	By J.A.
8-23-05	Subject was seized with warrant
	for TOP 2nd Band 2,500.00 had 1st
	AP - THIS DAY -
8-26-05	Had 1st on latest charge -
	TOP 2nd - 2500.00
8/31/05	Called OD Mitchum.
8-31-05	DR. MITCHUM OFF, CALLED EVERYTHING ALRIGHT

Exhibit E

Affidavit of Sheriff Greg Ward

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA**

JOHN P. POLCASTRO, SR.,)	
)	
Plaintiff,)	
)	
v.)	Civil Action No. 1:05-cv-00909-MEF-VPM
)	
GREG WARD, et al.,)	
)	
Defendants.)	

AFFIDAVIT OF GREG WARD

STATE OF ALABAMA)
)
COUNTY OF GENEVA)

BEFORE ME, the undersigned authority and Notary Public in and for said County and State at large, personally appeared Greg Ward, who being known to me and being by me first duly sworn on oath deposes and says as follows:

1. My name is Greg Ward. I am over the age of nineteen and competent to make this affidavit. I am the duly elected Sheriff of Geneva County, Alabama.

2. I am familiar with the Plaintiff due to his being incarcerated in the Geneva County Detention Facility. I have no personal knowledge of any of the specific allegations that form the basis of Plaintiff's Complaint.

3. I state affirmatively that I neither acted, nor caused anyone to act, in such a manner as to deprive the Plaintiff of any right to which he was entitled.

4. The Geneva County, Alabama Sheriff's Department operates the Geneva County Detention Facility pursuant to sound policies and procedures which ensure that the rights of all inmates incarcerated therein are respected. Members of the jail staff are trained both in house

and at certified training programs and academics regarding all aspects of their jobs, including the administration of medical care to inmates.

5. It is the policy of the Geneva County, Alabama Sheriff's Department that all inmates confined in the Geneva County Detention Facility be entitled to a level of health care comparable to that available to the citizens in the surrounding community in order that the inmates' physical and emotional well-being may be maintained. All medical care rendered to inmates in the Geneva County Detention Facility is delivered under the direction of a licensed health care practitioner. It is departmental policy that no member of the jail staff, or any other Sheriff's Department employee, may ever summarily or arbitrarily deny an inmate's reasonable request for medical services. All judgments regarding the necessity of medical treatment are left to a licensed health care practitioner.

6. It is the policy of the Geneva County Sheriff's Department that all inmates incarcerated in the Geneva County Detention Facility be allowed to request health care services at any time. Requests of an emergency nature may be made either verbally or in writing, but all requests for non-emergency care from state or county inmates must be submitted in writing. Members of the jail staff are charged with the responsibility of accepting requests for medical treatment from inmates and taking appropriate action to see that those requests are dealt with in a prompt and appropriate manner. Inmates with non-emergency medical problems are taken to see Dr. O.D. Mitchum in Geneva, Alabama. Inmates who have an emergency medical problem are taken to the Emergency Room for treatment.

7. When a member of the jail staff receives a request for medical treatment from an inmate, it is his or her responsibility to turn that request form over to the responsibility of the on duty jailer or matron. It is then the on duty jailer or matron's responsibility to make an

appointment for the inmate with an appropriate health care provider. Any doubt as to whether an actual need exists for medical treatment is resolved in favor of the inmate, with medical services being offered. All requests of an emergency nature are handled immediately.

8. It is the policy of the Geneva County Sheriff's Department that persons incarcerated in the Geneva County Detention Facility be entitled to safe and accurate dispensation and administration of prescription and nonprescription medication. All medication prescribed for an inmate by a health care provider during the time of an inmate's incarceration is obtained by the Sheriff's Department and distributed according to the doctor's directions. When distributing medications, members of the jail staff complete a medication log, which records the inmate's name, the medication, the date and time it was delivered, the initials of the officer delivering the medication, or supervising its delivery, and the inmate's initials or signature acknowledging receipt.

9. I have never denied necessary medical care or treatment to Plaintiff or any other inmate.

10. The Geneva County Detention Facility is subject to routine maintenance and repairs on a regular basis by the custodian.

11. All inmates, including the Plaintiff, are always provided with a mattress and bed linens for sleeping in the event that the number of inmates exceeds the number of beds at the jail. Never has the Plaintiff had to sleep on the floor without a mattress and bed linens.

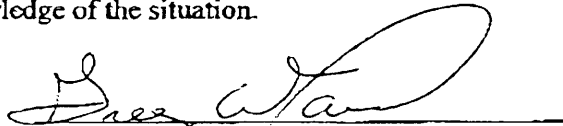
12. I was never in the possession of any cash money that was allegedly taken from Plaintiff's home, nor was I ever present at Plaintiff's home.

13. It is the policy of the Geneva County Sheriff's Department that only the minimal amount of force necessary will be used on an arrestee or inmate.

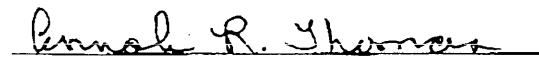
14. After the Plaintiff was booked into the jail, I only had one occasion on which I dealt with the Plaintiff. I received information from a trustee inmate that a riot was going to be started and that the Plaintiff was the ring leader. I told the inmates that this type behavior would not be tolerated and that their privileges, i.e. smoke break, etc., could be taken away for planning a riot. I brought the Plaintiff to my office and explained that such conduct would not be tolerated. The Plaintiff denied involvement. I warned him that the inmates would hold it against him if everyone got their privileges taken away because of one person's actions. My sole purpose in having this conversation with the Plaintiff was to protect the security interests of the Geneva County Detention Facility.

15. I have not received a grievance from the Plaintiff concerning the allegations made the basis of his Complaint.

16. I swear, to the best of my present knowledge and information, that the above statements are true, that I am competent to make this affidavit, and that the above statements are made by drawing from my personal knowledge of the situation.


GREG WARD

SWORN TO and SUBSCRIBED before me this 22 day of November, 2005.


NOTARY PUBLIC
My Commission Expires: 8/1/09